

SCHEDULE C
PREMIUM AND LOSS EXPERIENCE INFORMATION

This schedule contains loss experience information for the past five (5) years.

Loss Experience
As of 1/11/2002

<u>Period</u>	<u>Coverage</u>	<u>Total No. of Claims</u>	<u>Open</u>	<u>Closed</u>	<u>Insured Losses</u>	
07-01-1997/1998	CGL	40	1	39	571,290	Paid
					603,567	Incurred
07-01-1998/1999	CGL	39	3	36	238,086	Paid
					307,383	Incurred
07-01-1999/2000	CGL	48	20	28	5,091	Paid
					141,395	Incurred
07-01-2000/2001	CGL	40	14	26	2,887	Paid
					36,606	Incurred
07-01-2001/2002 (As of 12/10/2001)	CGL	8	6	2	0	Paid
					6,100	Incurred

Detail of Losses over \$50,000
As of 1/11/2002

<u>Date of Accident</u>	<u>Nature of Accident</u>	<u>Status of Claim</u>	<u>Total Incurred Including Expenses</u>
7/27/96	Claimant alleges seat fell, striking left thigh, fell backwards, severe injuries to left leg/thigh	Closed	\$ 61,609
1/22/97	Claimant practicing bungee jump Death from massive head injury	Closed	\$ 54,125
02/15/97	Security guard injured apprehending vagrant - injury to multiple body parts	Open	\$100,000
12/22/97	Claimant alleging struck by freight elevator - head injuries	Open	\$ 51,362
01/01/98	Slip and fall on water on the floor	Closed	\$ 60,607
04/04/98	Claimant tripped on piece of iron that held temp. seating - fractured left hand	Closed	\$ 57,253
09/26/98	Slip and fall on liquid on the floor	Open	\$ 61,783
10/11/98	Slip and fall on water on walkway	Closed	\$113,300

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	*	SCHEDULE C	*		*	
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		LOSS EXPERIENCE				
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SCHEDULE C - Continued
Past Excess Insurers and Premium

<u>Period</u>	<u>Company/Agent</u>	<u>Coverage</u>	<u>Premium</u>
07-01-96/97	National Union Fire Ins. Co./Aon Risk Services	\$2,000,000 Primary Liability	\$990,000
07-01-96/97	National Union Fire Ins. Co./Aon Risk Services	\$23,000,000 excess liability over \$2,000,000	\$243,500
07-01-96/97	TIG Insurance Company/ Aon Risk Services	\$25,000,000 excess liability over \$25,000,000	115,000
07-01-96/97	Federal Insurance Co./Aon Risk Services	\$25,000,000 part of \$50,000,000 excess liability over \$50,000,000	50,000
07-01-96/97	American National Fire Ins. Co./Aon Risk Services	\$25,000,000 part of \$50,000,000 excess liability over \$50,000,000	50,000
<hr/>			
<u>Period</u>	<u>Company/Agent</u>	<u>Coverage</u>	<u>Premium</u>
07-01-97/98	National Union Fire Ins. Co./Aon Risk Services	\$2,000,000 Primary Liability	\$990,000
07-01-97/98	National Union Fire Ins. Co./Aon Risk Services	\$23,000,000 excess liability over \$2,000,000	\$243,500
07-01-97/98	TIG Insurance Company/ Aon Risk Services	\$25,000,000 excess liability over \$25,000,000	115,000
07-01-97/98	Federal Insurance Co./Aon Risk Services	\$25,000,000 part of \$50,000,000 excess liability over \$50,000,000	50,000
07-01-97/98	American National Fire Ins. Co./Aon Risk Services	\$25,000,000 part of \$50,000,000 excess liability over \$50,000,000	50,000

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SCHEDULE C - Continued
Past Excess Insurers and Premium

<u>Period</u>	<u>Company/Agent</u>	<u>Coverage</u>	<u>Premium</u>
07-01-98/99	National Union Fire Ins. Co./Aon Risk Services	\$2,000,000 Primary Liability	\$990,000
07-01-98/99	National Union Fire Ins. Co./Aon Risk Services	\$23,000,000 excess liability over \$2,000,000	\$243,500
07-01-98/99	TIG Insurance Company/ Aon Risk Services	\$25,000,000 excess liability over \$25,000,000	115,000
07-01-98/99	Federal Insurance Co./Aon Risk Services	\$25,000,000 part of \$50,000,000 excess liability over \$50,000,000	50,000
07-01-98/99	Gerling American Ins. Co. /Aon Risk Services	\$25,000,000 part of \$50,000,000 excess liability over \$50,000,000	50,000

<u>Period</u>	<u>Company/Agent</u>	<u>Coverage</u>	<u>Premium</u>
07-01-99/00	American Alternative Ins. Corp. / Risk Services of LA	\$2,000,000 Primary Liability	\$1,096,881
07-01-99/00	Lumbermens Mutual Cas. Co. / Risk Services of LA	\$48,000,000 excess liability over \$2,000,000	\$192,000
07-01-99/00	National Union Fire Ins. Co. / Risk Services of LA	\$50,000,000 excess liability over \$50,000,000	79,738

<u>Period</u>	<u>Company/Agent</u>	<u>Coverage</u>	<u>Premium</u>
07-01-00/01	American Alternative Ins. Corp. / Risk Services of LA	\$2,000,000 Primary Liability	\$1,096,881
07-01-00/01	Lumbermens Mutual Cas. Co. / Risk Services of LA	\$48,000,000 excess liability over \$2,000,000	\$192,000
07-01-00/01	National Union Fire Ins. Co. / Risk Services of LA	\$50,000,000 excess liability over \$50,000,000	79,738

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SCHEDULE C - Continued
Current Excess Insurers and Premium

<u>Period</u>	<u>Company/Agent</u>	<u>Coverage</u>	<u>Premium</u>
07-01-01/02	American Alternative Ins. Corp. / Risk Services of LA	\$2,000,000 Primary Liability	\$1,096,881
07-01-01/02	Lumbermens Mutual Cas. Co. / Risk Services of LA	\$25,000,000 excess liability over \$2,000,000	\$ 198,957
07-01-01/02	Westchester Fire Ins. Co./ Risk Services of LA	\$23,000,000 excess liability over \$27,000,000	\$ 46,000
07-01-01/02	National Union Fire Ins. Co. / Risk Services of LA	\$50,000,000 excess liability over \$50,000,000	\$ 79,738

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PROGRAM: CLM009 REPORT: CLM009A										A K - R E N A N A G E R S ALL CLAIMS BY POLICY AS OF 12/18/2001 SUBSECTION: POLICY NUMBER = 01A2GL0000005										PAGE NO : 1 RUN DATE: 12/18/01 RUN TIME: 8:43:30	
CLAIM-CLAIMANT THIR CLAIM NUMBER CLAIMANT NAME																				TOTAL INCURRED	
POLICY: 01A2GL00000500 STATE OF LOUISIANA, LOUISIANA																					
ST	LOS	LOS DATE	ENTRY DATE	OPEN	CLOS DATE	LOSS RESERVE	EXPENSE RESERVE	LOSS PAYMENTS	EXPENSE PAYMENTS	SUBROGATION	SALVAGE	OTHER RECOVERIES									
LA 171	10/17/1999	12/22/1999	727			1,000	2,391	.00	1,609.00	.00	.00	.00	5,000.00								
LA 171	10/10/1999	12/22/1999	272	9/19/2000		0	0	.00	.00	.00	.00	.00	.00								
LA 171	10/10/1999	12/22/1999	272	9/19/2000		0	0	.00	.00	.00	.00	.00	.00								
LA 171	11/26/1999	12/22/1999	727			1,500	2,012	.00	6,489.60	.00	.00	.00	9,999.60								
LA 171	10/02/1999	12/22/1999	0	12/22/1999		0	0	.00	.00	.00	.00	.00	.00								
LA 171	8/21/1999	12/22/1999	126	4/26/2000		0	0	.00	.00	.00	.00	.00	.00								
LA 171	7/04/1999	12/22/1999	0	12/22/1999		0	0	.00	.00	.00	.00	.00	.00								
LA 171	7/02/1999	12/22/1999	0	12/22/1999		0	0	.00	.00	.00	.00	.00	.00								
LA 171	7/02/1999	12/22/1999	727			1,000	2,489	.00	2,510.00	.00	.00	.00	5,999.00								
LA 194	7/02/1999	3/08/2000	49	4/26/2000		0	0	344.74	45.50	.00	.00	.00	390.24								
LA 171	12/04/1999	3/08/2000	49	4/26/2000		0	0	79.00	.00	.00	.00	.00	79.00								
LA 194	1/31/2000	3/14/2000	43	4/26/2000		0	0	517.14	.00	.00	.00	.00	517.14								

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PROGRAM: CLX009 REPORT : CLX009A CLAIM-CLAIMANT CLAIMANT NAME POLICY: 01A2UL00000500 STATE OF LOUISIANA, LOUISIANA ST LOSS DATE ENTRY DATE OPEN CLOSE DATE AN - R E M A I N E R S ALL CLAIMS BY POLICY AS OF 12/10/2001 SELECTION: POLICY NUMBER - 01A2UL00000503										PAGE NO : 3 RUN DATE: 12/18/01 RUN TIME: 0:43:30		
00002535-01 000026	LA 171	1/29/2000	3/15/2000	188	9/19/2000	0	0	248.13	.00	.00	.00	248.13
00062536-01 000024	LA 171	2/12/2000	3/15/2000	188	9/19/2000	0	0	.60	.00	.00	.00	.00
00064946-01 000025	LA 171	2/06/2000	4/26/2000	651		1.000	0	.80	.00	.00	.00	1,000.00
000074620-01 000016	LA 171	12/24/1999	8/24/2000	0	8/24/2000	0	0	.00	.00	.00	.00	.00
000074449-01 000021	LA 171	8/05/1999	8/24/2000	477		1.000	3.815	.00	1,104.50	.00	.00	5,999.50
000076633-01 000015	LA 171	1/07/2000	9/08/2000	413	10/26/2001	0	0	.00	.00	.00	.00	.00
000076634-01 000035	LA 171	3/26/2000	9/09/2000	0	9/09/2000	0	0	.00	.00	.00	.00	.00
000076435-01 000030	LA 171	4/15/2000	9/09/2000	0	9/09/2000	0	0	.00	.00	.00	.00	.00
000076436-01 000034	LA 171	3/31/2000	9/08/2000	466		1.000	5.800	.00	.00	.00	.00	6,000.00
000076788-01 000036	LA 194	4/01/2000	9/15/2000	459		500	1,172	.00	3,027.00	.00	.00	5,499.00
000076790-01 000032	LA 194	4/01/2000	9/15/2000	32	10/17/2000	0	0	722.29	.00	.00	.00	702.29
000076805-01 000033	LA 171	4/09/2000	9/15/2000	0	9/15/2000	0	0	.00	.00	.00	.00	.00

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PROGRAM: CLK009 REPORT : CLK009A CLAIM-CLAIMANT THEIR CLAIM NUMBER CLAIMANT NAME POLICY: 01A2GL00000500 STATE OF LOUISIANA, LOUISIANA										PAGE NO : RUN DATE: 12/18/01 RUN TIME: 8:43:30			
A M - R E M A N A G E R S ALL CLAIMS BY POLICY AS OF 12/18/2001 SELECTION: POLICY NUMBER = 01A2GL000005													
ST	LOB	LOSS DATE	ENTRY DATE	OPEN DAYS	CLOSE DATE	LOSS RESERVE	EXPENSE RESERVE	LOSS PAYMENTS	EXPENSE PAYMENTS	SUBROGATION	SURVIVOR	OTHER RECOVERIES	TOTAL INCURRED
LA 171	4/04/2000	9/15/2000	4	9/19/2000	455	0	0	0	0	0	0	0	0
LA 171	7/04/1999	9/19/2000	455			3,500	5,000	0	1,394.50	0	0	0	9,894.50
LA 171	3/24/2000	9/19/2000	0	9/19/2000		0	0	0	0	0	0	0	0
LA 171	4/08/2000	9/19/2000	0	9/19/2000		0	0	0	0	0	0	0	0
LA 171	3/02/2000	11/01/2000	412			3,500	3,546	0	1,454.50	0	0	0	8,500.50
LA 171	3/05/2000	11/01/2000	412			1,000	789	0	1,711.00	0	0	0	3,500.00
LA 171	7/02/1999	1/22/2001	330			0	0	0	1,724.50	0	0	0	1,724.50
LA 171	11/07/1999	3/22/2001	330			5,000	322	0	2,177.50	0	0	0	7,499.50
LA 171	11/27/1999	3/13/2001	280			4,500	1,406	0	3,514.15	0	0	0	9,500.15
LA 171	1/30/2000	3/27/2001	266			1,500	0	0	0	0	0	0	1,500.00
LA 171	1/30/2000	3/27/2001	266			1,500	3,792	0	1,207.50	0	0	0	6,499.50
LA 171	3/21/2000	4/24/2001	230			100	802	0	1,697.50	0	0	0	2,599.50

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A M - E R M A N A G E R S															PAGE NO. : 5
ALL CLAIMS BY POLICY AS OF 12/18/2001															RUN DATE: 12/18/01
SELECTION: POLICY NUMBER = 01A2C000000005															RUN TIME: 0:43:30
PROGRAM: CLAC009 REPORT : CLAC009A CLAIM-CLAIMANT TIER CLAIM NUMBER CLAIMANT NAME	ST	LOSS	LOSS DATE	ENTRY DATE	OPEN DATE	CLOSE DATE	LOSS RESERVE	EXPENSE RESERVE	LOSS PAYMENTS	EXPENSE PAYMENTS	SUBROGATION	SALVAGE	OTHER RECOVERIES	TOTAL INCURRED	
POLICY: 01A2C00000000500 STATE OF LOUISIANA, LOUISIANA															
000106495-01 000016 LORRINE HULLINGCAST	LA 171	12/28/1999	7/17/2001			7/17/2001	0	0	0.00	0.00	0.00	0.00	0.00	0.00	
TOTAL: 01A2C00000000500 STATE OF LOUISIANA, LOUISIANA COUNT: 48															
POLICY: 01A2C00000000501 STATE OF LOUISIANA, LOUISIANA															
000076851-01 000039	LA 171	7/02/2000	9/19/2000	304		7/20/2001	0	0	1,087.66	0.00	0.00	0.00	0.00	1,087.66	
000080606-01 000041	LA 171	9/07/2000	11/02/2000			11/02/2000	0	0	0.00	0.00	0.00	0.00	0.00	0.00	
000080624-01 000040	LA 171	8/28/2000	11/03/2000			11/03/2000	0	0	0.00	0.00	0.00	0.00	0.00	0.00	
000089546-01 000045	LA 171	10/07/2000	1/22/2001	50		3/13/2001	0	0	0.00	0.00	0.00	0.00	0.00	0.00	
000089547-01 000047	LA 171	10/06/2000	1/22/2001	1		1/23/2001	0	0	0.00	0.00	0.00	0.00	0.00	0.00	
000089548-01 000053	LA 171	11/18/2000	1/22/2001	330			2,500	17	0.00	83.11	0.00	0.00	0.00	2,600.11	
000089550-01 000046	LA 171	10/14/2000	1/22/2001	1		1/23/2001	0	0	0.00	0.00	0.00	0.00	0.00	0.00	
000089551-01 000044	LA 171	10/07/2000	1/22/2001	1		1/23/2001	0	0	0.00	0.00	0.00	0.00	0.00	0.00	
000089552-01 000055	LA 171	11/24/2000	1/22/2001	277		10/26/2001	0	0	0.00	0.00	0.00	0.00	0.00	0.00	
000089553-01 000054	LA 171	10/25/2000	1/22/2001	179		7/20/2001	0	0	0.00	0.00	0.00	0.00	0.00	0.00	

PROGRAM: CLNC009 REPORT : CLNC009A CLAIM-CLAIMANT THEIR CLAIM NUMBER CLAIMANT NAME POLICY: 01A2GL000000501 STATE OF LOUISIANA, LOUISIANA										A M - R E N A N A G E R S ALL CLAIMS BY POLICY AS OF 12/18/2001 SELECTION: POLICY NUMBER = 01A2GL0000005										PAGE NO : 6 RUN DATE: 12/18/01 RUN TIME: 8:43:30	
ST LOS LOSS DATE ENTRY DATE OPEN CLOSE DATE DAYS										LOSS RESERVE	EXPENSE RESERVE	LOSS PAYMENTS	EXPENSE PAYMENTS	SUBROGATION	SALVAGE	OTHER RECOVERIES	TOTAL INSURED				
LA 171 12/24/2000 3/13/2001 14 3/27/2001										0	0	.00	.00	.00	.00	.00	.00				
LA 171 12/24/2000 3/13/2001 280										1,000	0	.00	.00	.00	.00	.00	1,000.00				
LA 171 10/25/2000 3/13/2001 0 3/13/2001										0	0	.00	.00	.00	.00	.00	.00				
LA 171 9/23/2000 3/13/2001 14 3/27/2001										0	0	.00	.00	.00	.00	.00	.00				
LA 171 7/02/2000 3/13/2001 14 3/27/2001										0	0	.00	.00	.00	.00	.00	.00				
LA 171 9/09/2000 3/13/2001 200										1,500	0	.00	.00	.00	.00	.00	1,500.00				
LA 171 0/25/2000 3/13/2001 100 6/21/2001										0	0	1,500.00	.00	.00	.00	.00	1,500.00				
LA 171 11/18/2000 3/13/2001 0 3/13/2001										0	0	.00	.00	.00	.00	.00	.00				
LA 171 9/09/2000 3/27/2001 266										3,500	1,500	.00	.00	.00	.00	.00	5,000.00				
LA 171 11/05/2000 3/27/2001 115 7/20/2001										0	0	.00	.00	.00	.00	.00	.00				
LA 171 1/21/2001 3/27/2001 0 3/27/2001										0	0	.00	.00	.00	.00	.00	.00				
LA 171 11/03/2000 4/16/2001 246										100	0	.00	.00	.00	.00	.00	100.00				

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PROGRAM: CLMC009 REPORT : CLMC009A										PAGE NO : 9 RUN DATE: 12/18/01 RUN TIME: 0:43:30									
CLAIM-CLAIMANT CLAIM NUMBER CLAIMANT NAME										ALL CLAIMS BY POLICY AS OF 12/18/2001 SUBSTATION: POLICY NUMBER = 01A2GL0000005									
POLICY: 01A2GL000000502 STATE OF LOUISIANA, SUPERDOME																			
000118661-01 000082																			
000118674-01 000085																			
000118679-01 000086																			
TOTAL: 01A2GL000000502 STATE OF LOUISIANA, SUPERDOME COURT:										1,500.00 6,100.00									

INTELLIRISK REPORTING SYSTEM				AIG INSURANCE SERVICES, INC., RMIS DIVISION			
RISK DETAIL REPORT							
CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE	
1215073	3202008	003769846 GL	07/01/96 - 07/01/97	DATE	DATE	1	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LA., LA. STADIUM & EXP		12/31/01	01/11/02		
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	TOTALS	SALVAGE	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE	SUBRO	INCURRED
STATUS	SYM ACCIDENT DESCRIPTION					OTHER	
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
7/01/96 251			CURR	.00	.00	.00	.00
11/12/96 039110			PREV	.00	.00	.00	.00
CLOSED 001	PREMISE -		RESV	.00	.00	.00	.00
6/26/97 251							
PREMISE	DAMAGES FOR BREACH OF CONTRACT						
	ALLEGING BREACH OF CONTRACT						.00
7/04/96 251		LA	CURR	.00	.00	.00	.00
7/05/96 034882			PREV	.00	.00	.00	.00
CLOSED 001	PREMISE -		RESV	.00	.00	.00	.00
8/02/96 251							
PREMISE	ALLEGING UNKNOWN BROKE INTO VEHICLEPARK						
	D ON LOT						941.93
	ELECTRICAL WIRING MISSING, DMG TO1985 CHEVY CELEBRITY 4 DR						
7/04/96 251		LA	CURR	.00	.00	.00	.00
7/04/96 035490			PREV	.00	.00	.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
1/28/97 251							
LIABILITY	ALLEGING SLIP & FALL						
	ALLEGING MINOR INJURIES						3,000.00
7/05/96 251		LA	CURR	.00	.00	.00	.00
1/16/97 041409			PREV	.00	.00	.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
9/12/97 251							
LIABILITY	CLMT ALLEGING AGGRAVATED BATTERY BY						
SUIT	SHOOTING AT SUPERDOME						
	GUNSHOT WOUND THRU TO THE UPPER RT LEG						8,765.89
7/05/96 251		LA	CURR	.00	.00	.00	.00
6/06/97 047306			PREV	.00	.00	.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
9/01/98 251							
LIABILITY	CLMT CAUGHT FINGERS BETWEEN FANBELT AND						
SUIT	PULLEY ON AIR CONDITIONER WHEN HE REACHED FOR FLASHLIGHT						
	TIPS OF RT INDEX AND RT MIDDLE FINGER SEVERED						32,276.08

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INTELLIRISK REPORTING SYSTEM										AIG INSURANCE SERVICES, INC., RMS DIVISION									
RISK DETAIL REPORT																			
CLIENT		ACCOUNT		POLICY		CONTRACT PERIOD		VALUATION		REPORT		PAGE							
1215073		3202008		003769846 GL		07/01/96 - 07/01/97		DATE		DATE		2							
STATE OF LOUISIANA		STATE OF LOUISIANA		STATE OF LA., LA-STADIUM & EXP				12/31/01		01/11/02									
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE	TOTAL											
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		SUBRO	INCURRED											
STATUS	SYM ACCIDENT DESCRIPTION						OTHER												
CLOS DATE	H-OFF	INJURY DESCRIPTION																	
LOSS TYPE																			
7/06/96	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
7/09/96	034880		PREV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
CLOSED	001		RESV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
12/26/96	251	ALLEGING SLIP & FALL ON WATER ON FLOOR																	
LIABILITY		TWISTED ANKLE											.00						
7/06/96	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
7/06/96	034895		PREV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
CLOSED	001		RESV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
10/14/96	251	CLMT ALLEGING UNKNOWN OBJECT FLEW INTO LEFT EYE																	
LIABILITY		FOREIGN OBJECT IN LEFT EYE											.00						
7/06/96	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
7/06/96	034900		PREV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
OPEN	001		RESV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
7/06/96	251	CLMT ALLEGING HE SLIPPED & FELL ON WATER ON FLOOR WHILE EXITING RESTROOM																	
LIABILITY		BRUISED KNEE											15,187.50						
7/06/96	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
9/27/96	037627		PREV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
CLOSED	001		RESV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
11/19/97	251	ALLEGING SLIP & FALL ON STAIRS AT CONCERT																	
LIABILITY		INJURED UPPER & LOWER PORTION OF LEFT LEG; BRUISE TO ELBOW											.00						
7/13/96	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
7/13/96	034887		PREV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
CLOSED	001		RESV	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00						
10/29/96	251	ALLEGING TRIPPED & FELL ON STAIRS																	
LIABILITY		ABRASION/SWELLING TO LEFT KNEE; LEFT ANKLE SORE											.00						

INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMIS DIVISION			
CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE	
1215073	3202008	003769846	07/01/96 - 07/01/97	DATE	DATE	3	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LA., LA. STADIUM & EXP		12/31/01	01/11/02		
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		INCURRED
STATUS	SYM ACCIDENT DESCRIPTION						
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
7/13/96	251	LA	CURR	.00	.00	.00	.00
7/13/96	034887		PREV	.00	.00	1097.00	.00
CLOSED	002		RESV	.00	.00	.00	.00
7/03/97	251						
LIABILITY	ALLEGING TRIPPED & FELL ON STAIRS						
							1,097.00
7/14/96	251	LA	CURR	.00	.00	.00	.00
7/15/96	034878		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
12/05/97	251						
LIABILITY	SLIP & FALL NEAR MEN'S RESTROOM						
							.00
	INJURY TO LEFT KNEE, BACK & LEFT THUMB						
7/16/96	251	LA	CURR	.00	.00	.00	.00
7/16/96	035495		PREV	.00	.00	5015.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
7/16/97	251						
LIABILITY	ALLEGING SLIP & FALL						
	BRUISE TO KNEE						5,015.00
7/18/96	251	LA	CURR	.00	.00	.00	.00
8/12/96	035910		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
10/14/96	251						
LIABILITY	CLMT GOT OFF BUS AND WAS WALKING & TRIP & FELL IN POT HOLE IN PUBLIC STREET KNEE AND ARM						.00
7/19/96	251	LA	CURR	.00	.00	.00	.00
3/11/98	057684		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
4/17/98	251						
LIABILITY	FELL OFF THE STEP BY HER CHAIR						
							.00
	TWISTED ANKLE/BRUISED HIP/SWOLLEN KNEE/ TREATED BY DR						.00

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CLIENT	ACCOUNT	STATE OF LOUISIANA	POLICY	CONTRACT PERIOD	VALUATION DATE	REPORT DATE	TOTALS	TOTAL	
1215073	3202008	STATE OF LOUISIANA	003769846 GL	07/01/96 - 07/01/97	12/31/01	01/11/02		4	
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	EXPENSE	PROPERTY	EXPENSE	TOTAL	
RPT. DATE	CASE NCCI OCCUPATION		BI					INCURRED	
STATUS	SYM ACCIDENT DESCRIPTION							OTHER	
LOSS DATE	LOSS TYPE	INJURY DESCRIPTION							
7/27/96	251	LA	CURR	.00	.00	.00	.00	.00	
7/21/97	049211		PREV	.00	.00	.00	.00	.00	
CLOSED	001		RESV	.00	.00	.00	.00	.00	
6/22/99	251	CLMT ALLEING SEAT FELL, STRIKING HIS							
LIABILITY		LEFT UPPER THIGH, KNOCKING HIM BACKWARDS							
SUIT		ALLEGING SEVERE INJURIES TO LEFT LEG/THIGH						61,608.69	
8/01/96	251	LA	CURR	.00	.00	.00	.00	.00	
8/26/98	064193		PREV	.00	.00	.00	.00	.00	
CLOSED	001		RESV	.00	.00	.00	.00	.00	
9/10/98	251	ALLEGES DISCRIMINATION/VERBAL							
LIABILITY		HARASSMENT/UNEQUAL WAGES ASSIGNMENTS & TRAINING						.00	
		DISCRIMINATION							
8/02/96	251	LA	CURR	.00	.00	.00	.00	.00	
8/12/96	035912		PREV	.00	.00	.00	.00	.00	
CLOSED	001	PREMISE -	RESV	.00	.00	.00	.00	.00	
9/11/96	251	CLMT EXITING PARKING GARAGE WHEN THEPARK							
PREMISE		ING ARM CAME DOWN ON ROOF OF HIS VEHICLE						345.40	
		SCRATCHES/DENT ON ROOF OF DRIVER'S SIDE						.00	
8/07/96	251	LA	CURR	.00	.00	.00	.00	.00	
8/08/96	035806		PREV	.00	.00	.00	.00	.00	
CLOSED	001		RESV	.00	.00	.00	.00	.00	
5/17/99	242	ALLEGING CHILD FELL OVER SIDE OF ES-							
LIABILITY		CALATOR TO GROUND						10731.98	
SUIT		SUFFERED BROKEN LEG, HIP AREA; CUTS TOHEAD						.00	
8/10/96	251	LA	CURR	.00	.00	.00	.00	.00	
9/03/97	051144		PREV	.00	.00	.00	.00	.00	
CLOSED	001		RESV	.00	.00	.00	.00	.00	
10/30/00	242	ALLEGING MINOR WAS RAPED ON NUMEROUS							
LIABILITY		OCCASIONS BY INSD'S EMPLOYEE						15969.46	
		ALLEGING CONTRACTED SEXUALLY TRANSMITTED						.00	
		DISEASE						7383.73-	
								8,585.73	

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CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION DATE	REPORT DATE	PAGE	
1215073	3202008	003769846 GL	07/01/96 - 07/01/97	12/31/01	01/11/02	5	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LA., LA. STADIUM & EXP					
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL PROPERTY	ALLOCATED EXPENSE	TOTALS	SALVAGE SUBRO OTHER
RPT. DATE	CASE NCCI OCCUPATION		BI				TOTAL INCURRED
STATUS	SYM	ACCIDENT DESCRIPTION					
CLOS DATE	H-OFF	INJURY DESCRIPTION					
8/17/96	251	LA	CURR	.00	.00	.00	.00
8/29/96	036659		PREV	.00	3841.45	7547.45	.00
CLOSED	001		RESV	.00	.00	.00	.00
4/20/98	251	SLIP AND FALL ON A GRADING PLATE AT GATE					
LIABILITY		E OF SUPERDOME					
SUIT		NOSE INJURY, VARIOUS ABRASIONS AND LEFT HAND AND WRIST PAIN				7,547.45	
8/17/96	251	LA	CURR	.00	.00	.00	.00
9/12/96	037029		PREV	.00	.00	27.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
9/19/96	251	CLMT FELL OVER A HANDICAPPED SEAT					
LIABILITY		KNEE ABRASION, SWOLLEN LIP AND BROKEN GLASSES				27.00	
9/03/96	251	LA	CURR	.00	.00	.00	.00
4/11/97	045212		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
1/05/98	251	CEILING TILE CAME DOWN ON HEAD WHILE SHE					
LIABILITY		WAS CLEANING					
SUIT		HEAD AND UPPER BACK				.00	
9/05/96	251	LA	CURR	.00	.00	.00	.00
9/12/96	037019		PREV	.00	.00	1539.31	.00
CLOSED	001		RESV	.00	.00	.00	.00
12/18/96	251	CLAIMANT SLIPPED AND FELL ON PARKING					
LIABILITY		GARAGE STAIRWAY AT LA SUPERDOME					
		FRACTURED ELBOW				1,539.31	
9/07/96	251	LA	CURR	.00	.00	.00	.00
9/12/96	037021		PREV	.00	.00	.00	.00
CLOSED	001	PREMISE -	RESV	.00	.00	144.14	.00
9/26/96	251	EMPLOYEE VEHICLE VANDALIZED INEMPLOYEE P					
PREMISE		ARKING LOT					
		PASSENGER SIDE WINDOW BROKEN AND A BRICK WAS INHIS VEHICLE B					
		UT NO ITEMS TAKEN FROM CAR				144.14	

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CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE
1215073	3202008	003769846	07/01/96 - 07/01/97	DATE	DATE	6
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LA., LA. STADIUM & EXP		12/31/01	01/11/02	
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	TOTALS	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	ALLOCATED	INCURRED
STATUS	SYM ACCIDENT DESCRIPTION				EXPENSE	
CLOS DATE	H-OFF INJURY DESCRIPTION					
LOSS TYPE						
9/08/96	251 I	LA	CURR	.00	.00	.00
9/12/96	037031		PREV	3783.03	.00	.00
CLOSED	001		RESV	.00	.00	.00
10/11/96	251					
PREMISE	TWO VEHICLES WERE REPORTED STOLEN					
	FROM PARKING LOT					
	STOLEN AND RECOVERED WITH BACK SEATS STOLEN					3,783.03
9/08/96	251	LA	CURR	.00	.00	.00
9/12/96	037031		PREV	5157.13	.00	.00
CLOSED	002		RESV	.00	.00	.00
10/10/96	251					
PREMISE	TWO VEHICLES WERE REPORTED STOLEN					
	FROM PARKING LOT					
	STOLEN VEHICLE					5,157.13
9/08/96	251	LA	CURR	.00	.00	.00
9/17/96	037180		PREV	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00
3/20/98	251					
LIABILITY	ALLEGING CLIMT WALKING DOWN ESCALATOR,					
	MISJUDGED STEPS & FELL					
	BUMP TO HEAD					.00
9/09/96	251	LA	CURR	.00	.00	.00
9/09/96	037630		PREV	8645.00	.00	.00
CLOSED	001		RESV	.00	.00	.00
6/16/97	251					
LIABILITY	ALLEGING SLIP & FALL ON WATER ON					
	FLOOR CAUSING INJURIES					
	TWISTED RT ANKLE, RT HIP IS SORE					8,645.00
9/09/96	251	LA	CURR	.00	.00	.00
8/22/97	050620		PREV	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00
4/08/98	251					
LIABILITY	SLIPPED ON POPCORN OIL AND FELL ON					
	HER LEFT KNEE					
	LEFT KNEE PAIN/DR REPT SAYS STRAIN					.00

INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMS DIVISION						
CLIENT	ACCOUNT	STATE OF LOUISIANA	STATE OF LOUISIANA	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE		
1215073	3202008	STATE OF LOUISIANA	STATE OF LA., LA. STADIUM & EXP	003769846 GL	07/01/96 - 07/01/97	12/31/01	DATE	7		
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE	TOTAL		
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		SUBRO	INCURRED		
STATUS	SYM ACCIDENT DESCRIPTION						OTHER			
CLOS DATE	H-OFF	INJURY DESCRIPTION								
LOSS TYPE										
9/13/96	251	LA	CURR	.00	.00	.00	.00	.00		
9/27/96	037582		PREV	1031.28	.00	1031.28	.00	.00		
CLOSED	001		RESV	.00	.00	.00	.00	.00		
1/06/97	251	CLMT ALLEGING SHE SLIPPED & FELL ON								
LIABILITY		WAY TO LADIES RESTROOM								
		BROKEN RT FOOT						1,031.28		
9/13/96	251	LA	CURR	.00	.00	.00	.00	.00		
11/08/96	039096		PREV	.00	.00	.00	.00	.00		
CLOSED	001		RESV	.00	.00	.00	.00	.00		
11/20/96	251	CLMT WAS WALKING DOWN STAIRS WITH CAIN						.00		
LIABILITY		AND TRIPPED AND FELL								
		PAIN TO LT KNEE, HIPS, RT ELBOW AND NECK								
10/13/96	251	LA	CURR	.00	.00	.00	.00	.00		
10/22/96	038489		PREV	.00	.00	.00	.00	.00		
CLOSED	001	PREMISE -	RESV	.00	.00	.00	.00	.00		
7/01/97	251	CLMTS WHEELCHAIR WAS LOST AND STOLEN								
PREMISE		WHILE ATTENDING AN EVENT AT INSD LOCATION						.00		
		WHEELCHAIR MISSING								
10/13/96	251	LA	CURR	.00	.00	.00	.00	.00		
10/21/96	039044		PREV	.00	4051.26	4051.26	.00	.00		
CLOSED	001		RESV	.00	.00	.00	.00	.00		
4/23/99	251	CLMT ALLEGING HE SLIPPED & FELL ON BEERA								
LIABILITY		T STADIUM								
SUIT		CLMT ALLEGING INJURIES TO HEAD & BACK						4,051.26		
10/13/96	251	LA	CURR	.00	.00	.00	.00	.00		
11/05/96	039050		PREV	.00	.00	.00	.00	.00		
CLOSED	001	PREMISE -	RESV	.00	.00	.00	.00	.00		
11/25/96	251	CLAIMANT ALLEGES VEHICLE WAS DAMAGED WHI								
PREMISE		LE PARKED IN SUPERDOME GARAGE.								
		FRONT RIGHT QUARTER PANEL, DOOR AND RIGHT REAR QUARTER PANEL						.00		
		DAMAGE TO '84 OLDSMOBILE REGENCY								

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CLIENT	ACCOUNT	STATE OF LOUISIANA	POLICY	GL	CONTRACT PERIOD	VALUATION DATE	REPORT DATE	PAGE
1215073	3202008	STATE OF LOUISIANA	003769846	STATE OF LA., LA. STADIUM & EXP	07/01/96 - 07/01/97	12/31/01	01/11/02	8
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		SUBRO	INCURRED
STATUS	SYM ACCIDENT DESCRIPTION						OTHER	
CLOS DATE	H-OFF							
LOSS TYPE	INJURY DESCRIPTION							
10/13/96	251	LA	CURR	.00	.00	.00	.00	.00
11/05/96	039054		PREV	.00	.00	12000.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00	.00
4/17/98	251							
LIABILITY	CLAIMANT'S SEAT BROKE CAUSING HIM TO STRIKE HIS BACK ON THE CHAIR. INJURY TO HIS BACK					12,000.00		.00
10/13/96	251	LA	CURR	.00	.00	.00	.00	.00
3/11/97	043837		PREV	.00	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00	.00
5/29/97	251							
LIABILITY	CLMT DESCENDING THE TERRACE STAIRS AND SHE SLIPPED AND FELL. JONES FRACTURE AT THE BASE OF 5TH RIGHT KNEE							.00
10/13/96	251	LA	CURR	.00	.00	.00	.00	.00
9/11/97	051467		PREV	.00	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00	.00
2/23/98	251							
LIABILITY	UNKNOWN INTOXICATED WHITE MALE FELL STRIKING CLAIMANT ON THE NECK NECK SPRAIN							.00
11/03/96	251	LA	CURR	.00	.00	.00	.00	.00
11/05/96	039047		PREV	.00	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00	.00
11/25/96	251							
LIABILITY	CLMT ALLEGING HE HAD FALLEN AT UNDISCLOSED LOCATION UNKNOWN INJURY TO BACK							.00
11/03/96	251	LA	CURR	.00	.00	.00	.00	.00
11/05/96	039072		PREV	.00	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00	.00
2/07/97	251							
PREMISE	PREMISE - CLAIMANT ALLEGES THAT HIS PHONE WAS STOLEN FROM THE PRESS BOOTH MISSING WHITE AT&T PRINCESS PHONE							.00

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RISK DETAIL REPORT							
CLIENT	ACCOUNT	STATE OF LOUISIANA	STATE OF LOUISIANA	POLICY	CONTRACT PERIOD	VALUATION	REPORT
1215073	3202008	STATE OF LOUISIANA	STATE OF LA., LA. STADIUM & EXP	003769846 GL	07/01/96 - 07/01/97	DATE	DATE
STATE OF LOUISIANA						12/31/01	01/11/02
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		SUBRO
STATUS	SYM ACCIDENT DESCRIPTION						OTHER
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
11/03/96	251	LA	CURR	.00	.00	.00	.00
11/05/96	039074		PREV	.00	.00	.00	.00
NOTICE	001		RESV	.00	.00	.00	.00
LIABILITY	251						
	PATRON SUFFERED A HEART ATTACK WHILE ATT						
	ENDING A FOOTBALL GAME.						
	HEART ATTACK RESULTING IN DEATH						
							.00
11/03/96	251	LA	CURR	.00	.00	.00	.00
11/03/96	039714		PREV	.00	.00	243.46	.00
CLOSED	001		RESV	.00	.00	.00	.00
2/10/97	251					.00	.00
LIABILITY							
	CLMT ALLEGING SECURITY GUARD ACCIDENTLY						
	STRUCK HIM IN HIS EYE						
	IRRITATION TO RT EYE						
							243.46
11/05/96	251	LA	CURR	.00	.00	.00	.00
11/11/96	039705		PREV	.00	.00	408.88	.00
CLOSED	001		RESV	.00	.00	.00	.00
2/10/97	251					.00	.00
PREMISE							
	CLMT ALLEGING PAINT OVERSPRAY TO VEHICLE						
	PAINT OVERSPRAY TO 1993 JEEP CHEROKEE						
							408.88
11/24/96	251	LA	CURR	.00	.00	.00	.00
12/04/96	040243		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
1/29/97	251					.00	.00
PREMISE							
	CLMT ALLEGING PAINT SPLATTERED ON HIS VE						
	HICLE; PAINTING WAS GOING ON IN GARAGE AT THAT TIME						
	ALLEGING ORANGE PAINT DOTS ON HOOD & LEFT DOOR OF 1988 ISUZU						
	TRUCK						
							.00
12/01/96	251	LA	CURR	.00	.00	.00	.00
12/01/96	039799		PREV	.00	270.00	270.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
2/27/97	251					.00	.00
LIABILITY							
	ALLEGING CLMT LEAPED ACROSS MEDIAN BETWE						
	EN ESCALATORS & FELL OFF WALL						
	LACERATION TO FOREHEAD; POSSIBLE CERVICAL SPINE INJURY						
							270.00

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1215073	3202008	STATE OF LOUISIANA	003769846 GL	07/01/96 - 07/01/97	12/31/01	01/11/02	10
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL PROPERTY	ALLOCATED EXPENSE	TOTALS	SALVAGE SUBRO OTHER
RPT. DATE	CASE NCCI OCCUPATION		BI				TOTAL INCURRED
STATUS	SYM ACCIDENT DESCRIPTION						
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
12/08/96	251	LA	CURR	.00	.00	.00	.00
4/25/97	045615		PREV	6652.16	.00	6652.16	.00
CLOSED	001		RESV	.00	.00	.00	.00
12/05/97	251						
LIABILITY	WALKING UNDER STANDS TRIPPED OVER "TRAUF F" FALLING INTO IT LOWER LFT LEG						6,652.16
1/02/97	251	LA	CURR	.00	.00	.00	.00
1/16/97	041414		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
5/22/97	251						
PREMISE	CLMT ALLEGING HER SHOE WAS DMG WHILE RIDING ON ESCALATOR BROKE HEEL OFF SHOE - \$55.00						.00
1/02/97	251	LA	CURR	.00	.00	.00	.00
1/16/97	041416		PREV	1916.00	37.50	1953.50	.00
CLOSED	001		RESV	.00	.00	.00	.00
8/05/97	251						
LIABILITY	ALLEGING SLIP & FALL IN RESTROOM ALLEGING BACK PAIN						1,953.50
1/02/97	251	LA	CURR	.00	.00	.00	.00
1/21/97	041620		PREV	10000.00	.00	10000.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
7/28/97	251						
LIABILITY	ALLEGING SLIP & FALL; FELL BACKWARDS HIT TING HER HEAD ON CONCERT STEP LACERATION TO HEAD						10,000.00
1/02/97	251	LA	CURR	.00	.00	.00	.00
1/27/98	056242		PREV	1500.00	2446.50	3946.50	.00
CLOSED	001		RESV	.00	.00	.00	.00
12/23/98	251						
LIABILITY	CLMT WAS STRUCK IN FACE BY A FOOTBALL DURING A PROMOTIONAL DISPLAY GAME CONTEST LOSS OF FRONT TOOTH FACE BRUISED						3,946.50

INTELLIRISK REPORTING SYSTEM				AIG INSURANCE SERVICES, INC., RMIS DIVISION			
RISK DETAIL REPORT							
CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE	
1215073	3202008	003769846 GL	07/01/96 - 07/01/97	DATE	DATE	11	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LA., LA. STADIUM & EXP		12/31/01	01/11/02		
LOGS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		INCURRED
STATUS	SYM ACCIDENT DESCRIPTION						
CLOS DATE	H-OFF	INJURY DESCRIPTION					
LOSS TYPE							
1/11/97	251 E	LA	CURR	.00	.00	.00	.00
1/16/97	041413		PREV	.00	322.50	332.50	.00
CLOSED	001		RESV	.00	.00	.00	.00
3/13/98	251	ALLEGING CLMT TRIPPED ON A PARKING					
LIABILITY		MEDIUM IN GARAGE					
		INJURED LEFT KNEE & RT HAND					332.50
1/11/97	251	LA	CURR	.00	.00	.00	.00
4/23/97	045672		PREV	.00	.00	95.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
7/14/97	251	PIECE OF STEEL FLEW IN CLMTS EYE WHEN					
LIABILITY		HE ATTENDED TRUCK & TRACTOR PULL					
		EYE					95.00
1/11/97	251	LA	CURR	.00	.00	.00	.00
11/26/97	054383		PREV	.00	8820.00	8820.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
12/01/99	251	CLAIMANT ALLEGES THAT INSURED DISPLAYED					
LIABILITY		A MESSAGE ON THE SCOREBOARD THAT HUMILIATED HIM					
SUIT		HUMILIATION; LIBEL AND SLANDER					8,820.00
1/22/97	251	LA	CURR	.00	.00	.00	.00
2/06/97	042027		PREV	.00	54125.36	54125.36	.00
CLOSED	001		RESV	.00	.00	.00	.00
8/29/00	242	CLMT PRACTICING BUNGEE JUMPING ACT FOR					
LIABILITY		SUPERBOWL HALF TIME SHOW, GOT TANGLED HIT HEAD ON FLOOR					
SUIT		CLMT DIED FROM MASSIVE HEAD INJURIES					54,125.36
1/26/97	251	LA	CURR	.00	.00	.00	.00
2/20/97	042789		PREV	.00	2587.18	2587.18	.00
CLOSED	001		RESV	.00	.00	.00	.00
1/27/98	251	ALLEGING SLIP & FALL GOING DOWN STAIRS					
LIABILITY		ALLEGING PAIN TO HEAD AND BACK					2,587.18

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INTELLIRISK REPORTING SYSTEM				AIG INSURANCE SERVICES, INC., RMIS DIVISION			
RISK DETAIL REPORT							
CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE	
1215073	3202008	003769846 GL	07/01/96 - 07/01/97	DATE	DATE	12	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LA., LA. STADIUM & EXP		12/31/01	01/11/02		
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	TOTALS	SALVAGE	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE	SUBRO	INCURRED
STATUS	SYM ACCIDENT DESCRIPTION					OTHER	
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
1/26/97	251	LA	CURR	.00	.00		.00
7/21/97	049275		PREV	.00	1389.00		.00
CLOSED	001		RESV	.00	.00		.00
1/25/99	251						
LIABILITY	MUSCULAR DYSTROPHY PATIENT TAKEN TO						
SUIT	HOSPITAL FOR RESPIRATORY DIFFICULTIES						
	RESPIRATORY PROBLEMS						
2/08/97	251	LA	CURR	.00	.00		1,389.00
2/20/97	042792		PREV	.00	.00		.00
CLOSED	001		RESV	.00	.00		.00
7/30/97	251						
LIABILITY	CLMT ALLEGING THE CHAIR HE ATTEMPTED TO						
	SIT DOWN IN COLLAPSED, CAUSING INJURY TO NECK						
	RIGHT LATERAL NECK INJURY						
2/15/97	251	LA	CURR	.00	.00		.00
3/11/98	057673		PREV	.00	.00		.00
OPEN	001		RESV	.00	100000.00		.00
2/24/97	251	LA	CURR	.00	.00		.00
3/05/97	043592		PREV	.00	.00		.00
CLOSED	001		RESV	.00	.00		.00
4/02/97	251						
PREMISE	SECURITY GUARD WAS INJURED TRYING						
	TO APPREHEND VAGRANT						
	BRUISED LIVER, 3 BROKEN FINGERS ON RIGHT HAND						
	MUSCLE STRAIN IN BACK						
2/27/97	251	LA	CURR	.00	.00		.00
3/05/97	043586		PREV	.00	.00		.00
CLOSED	001		RESV	.00	.00		.00
3/28/97	251						
PREMISE	OUTBOARD MOTOR MISSING						
	OUTBOARD MOTOR MISSING & WIRES CUT						
2/27/97	251	LA	CURR	.00	.00		.00
3/05/97	043586		PREV	.00	.00		.00
CLOSED	001		RESV	.00	.00		.00
3/28/97	251						
PREMISE	CLMT PARKED HIS VEH IN INS/GARAGE, SPAR						
	E TIRE MISSING						
	MISSING SPARE TIRE						

INTELLIRISK REPORTING SYSTEM				AIG INSURANCE SERVICES, INC., RMS DIVISION			
RISK DETAIL REPORT							
CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE	
1215073	3202008	003769846	07/01/96 - 07/01/97	DATE	DATE	13	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LA., LA. STADIUM & EXP		12/31/01	01/11/02		
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		SUBRO
STATUS	SYM ACCIDENT DESCRIPTION						OTHER
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
3/14/97	251	LA	.00	.00	.00	.00	.00
3/20/97	044473		.00	.00	.00	.00	.00
CLOSED	001		.00	.00	.00	.00	.00
6/04/97	251						
LIABILITY	CLMT TRIPPED OVER CONCRETE BLOCK						
	IN PARKING GARAGE						
	PAIN IN LT ANKLE AND RT KNEE						.00
4/04/97	251	LA	.00	.00	.00	.00	.00
4/14/97	045234		.00	53.33	.00	53.33	.00
CLOSED	001		.00	.00	.00	.00	.00
4/25/97	251						
PREMISE	CLMT WAS EXITING GARAGE WHEN EXIT GATE C						
	LOST DOWN ON HIS VEHICLE						
	BROKEN VEHICLE ANTENNA						53.33
6/01/97	251	LA	.00	.00	.00	.00	.00
7/21/97	049232		.00	.00	3398.45	3398.45	.00
CLOSED	001		.00	.00	.00	.00	.00
4/08/99	251						
LIABILITY	DOING LADDER CLIMB/HIT LAST STEP/FELLON						
SUIT	HANDS AND LEFT KNEE						
	SCRAPED HANDS AND LEFT KNEE						3,398.45
6/12/97	251	LA	.00	.00	.00	.00	.00
7/21/97	049270		500.00	.00	.00	500.00	.00
CLOSED	001		.00	.00	.00	.00	.00
6/12/98	251						
LIABILITY	CLMT ALLEGED SHE STUBBED TOE ON						
	BARRICADE CAUSING INJURY I						
	CRACKED TOENAIL, BLEEDINGQ						500.00

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INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMS DIVISION			
CLIENT	ACCOUNT	POLICY	GL	CONTRACT PERIOD	VALUATION DATE	REPORT DATE	PAGE
1215073	3202008	003769873	STATE OF LOUISIANA	07/01/97 - 07/01/98	12/31/01	01/11/02	15
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LOUISIANA					
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL PROPERTY	ALLOCATED EXPENSE	TOTALS	TOTAL INCURRED
RPT. DATE	CASE NCI		BI				
STATUS	SYM	ACCIDENT DESCRIPTION					
CLOS DATE	H-OFF	INJURY DESCRIPTION					
LOSS TYPE							
7/08/97 251		LA	CURR	.00	.00	.00	.00
8/29/97 051047			PREV	.00	.00	.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
9/18/97 251		CLAIMT FELL IN PRESSBOX					
LIABILITY		PAIN IN RIGHT SIDE					.00
7/10/97 251		LA	CURR	.00	.00	.00	.00
9/01/97 051459			PREV	.00	.00	.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
7/08/98 251		CLAIMANT ALLEGES SHE SLIPPED & FELL DUE TO FLOOR BEING WET					
LIABILITY		PAIN IN LEFT SIDE OF NECK AND IN FINGER ON RIGHT HAND					19,024.00
8/13/97 251		LA	CURR	.00	.00	.00	.00
9/11/97 051429			PREV	.00	.00	.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
9/23/97 251		PARKING ARM CAME DOWN ON CLAIMANT'S VEHICLE					
PREMISE		ROOF DAMAGE TO '89 TOYOTA CAMRY					.00
8/28/97 251		LA	CURR	.00	.00	.00	.00
12/11/97 054733			PREV	.00	.00	.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
12/18/97 251		CLAIMT VEH DAMAGED WHILE PARKED ON THE LOADING DOCK OF SUPERDOME					
PREMISE		RIGHT SIDE DAMAGE/1993 TOYOTA CAMRY LE					910.20
9/06/97 251		LA	CURR	.00	.00	.00	.00
10/21/97 053016			PREV	.00	.00	.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
2/23/98 251		CLAIMANT TRIPPED & FELL OVER THE WALKWAY BETWEEN TWO ROWS OF CARS					
LIABILITY		LACERATIONS TO KNEES, HANDS & LIP AND SPRAIN TO TO RIGHT SHOULDER & UPPER ARM					588.00

INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMIS DIVISION			
CLIENT	ACCOUNT	STATE OF LOUISIANA	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE
1215073	3202008	STATE OF LOUISIANA	003769873 GL	07/01/97 - 07/01/98	DATE	DATE	16
STATE OF LOUISIANA			STATE OF LOUISIANA		12/31/01	01/11/02	
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		INCURRED
STATUS	SYM ACCIDENT DESCRIPTION						
CLOS DATE	H-OFF	INJURY DESCRIPTION					
LOSS TYPE							
9/07/97	251	LA	CURR	.00	.00	.00	.00
9/07/97	051336		PREV	.00	3287.50	43287.50	.00
CLOSED	001		RESV	.00	.00	.00	.00
6/02/99	251						
LIABILITY		SLIPPED AND FELL IN BATHROOM/LANDED DIRE					
SUIT		CTLY ON TSPINE & THEN HIT HEAD/HAD PRIOR BACK SURGERY					
		BACK AND HEAD PAIN/HAD BACK SURGERY 7/16/97/HAS ATTY					43,287.50
9/07/97	251	LA	CURR	.00	.00	.00	.00
9/11/97	051431		PREV	.00	.00	1542.46	.00
CLOSED	001		RESV	.00	.00	.00	.00
5/08/98	251						
LIABILITY		CLAIMANT ALLEGES SHE SLIPPED & FELL WHILE					
		E ATTENDING A SAINTS GAME AT THE SUPERDOME					
		CONTUSION TO HEAD					1,542.46
9/07/97	251	LA	CURR	.00	.00	.00	.00
9/09/97	051445		PREV	.00	.00	875.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
11/25/97	251						
LIABILITY		CLMT ALLEGES SHE SLIPPED ON SOMETHING WE					
		T AND FELL & STRUCK A SEAT					
		BACK PAIN & SORE RIBS					875.00
9/11/97	251	LA	CURR	.00	.00	.00	.00
12/16/97	054940		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
1/16/98	251						
PREMISE		CLMT PARKED VAN IN PARKING GARAGE/DID					
		NOT PAY ATTENTION TO LOW CLEARANCE SIGNS AND TORE OFF RACK					
		LUGGAGE RACK TORN OFF TOP OF VEHICLE/					.00
		1984 FORD VAN					
9/12/97	251	LA	CURR	.00	.00	.00	.00
1/20/98	056021		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
1/02/01	251						
LIABILITY		SLIPPED AND FELL ON WATER ON RAMP					
SUIT		POSSIBLE DISLOCATED RIGHT SHOULDER/AMBULANCE TOOK TO					
		HOSPITAL					22,406.27

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PREMIUM AND

LOSS EXPERIENCE

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INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMS DIVISION				PAGE	
CLIENT	ACCOUNT	POLICY	GL	CONTRACT PERIOD	VALUATION	REPORT			
1215073	3202008	003769873	STATE OF LOUISIANA	07/01/97 - 07/01/98	12/31/01	01/11/02		17	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LOUISIANA						
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE	TOTAL	
RPT. DATE	CASE NCCI		BI	PROPERTY	EXPENSE		SUBRO	INCURRED	
STATUS	SYM	ACCIDENT DESCRIPTION					OTHER		
LOSS DATE	H-OFF	INJURY DESCRIPTION							
LOSS TYPE									
9/21/97	251	LA	CURR	.00	.00	.00	.00	.00	
10/21/97	053012		PREV	.00	.00	14000.00	.00	.00	
CLOSED	001		RESV	.00	.00	.00	.00	.00	
9/16/98	251								
LIABILITY		CLMT ALLEGES THAT ESCALATOR STOPPED AND THREW HIM FORWARD TO HIS KNEES. RIGHT KNEE PAIN							14,000.00
9/22/97	251	LA	CURR	.00	.00	.00	.00	.00	
9/22/97	069899		PREV	.00	7804.00	9115.23	.00	.00	
CLOSED	001		RESV	.00	.00	.00	.00	54.00-	
8/15/01	251								
LIABILITY		CLMT WAS STRUCK BY SERVICE ELEVATOR DOOR							
SUIT		HEAD							9,061.23
10/12/97	251	LA	CURR	.00	.00	.00	.00	.00	
11/05/97	053562		PREV	.00	.00	892.50	.00	.00	
CLOSED	001		RESV	.00	.00	.00	.00	.00	
3/24/98	251								
LIABILITY		MISSED STEP DOWN FROM CURB							
		TWISTED AND SWOLLEN RIGHT ANKLE							892.50
10/24/97	251	LA	CURR	.00	.00	.00	.00	.00	
11/06/97	053565		PREV	.00	.00	10.00	.00	.00	
CLOSED	001		RESV	.00	.00	.00	.00	.00	
11/13/97	251								
PREMISE		CLMT ALLEGING SHE STOOD UP IN FRONT OF HER SEAT, STARTED TO SIT DOWN & FELL TEARING HER PANTS REIMB FOR TORN PANTS \$10.00							10.00
10/26/97	251	LA	CURR	.00	.00	.00	.00	.00	
11/05/97	053566		PREV	.00	.00	.00	.00	.00	
CLOSED	001		RESV	.00	.00	.00	.00	.00	
12/22/97	251								
LIABILITY		PUSHED BY SOMEONE IN CROWD OVER RAILING AND LANDED ON ROOF OF VAN INJURED BACK AND LEFT ANKLE							.00

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INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMIS DIVISION			
CLIENT	ACCOUNT	POLICY	GL	CONTRACT PERIOD	VALUATION DATE	REPORT DATE	PAGE
1215073 STATE OF LOUISIANA	3202008 STATE OF LOUISIANA	003769873 STATE OF LOUISIANA		07/01/97 - 07/01/98	12/31/01	01/11/02	19
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	TOTALS	SALVAGE	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE	SUBRO	INCURRED
STATUS	SYM ACCIDENT DESCRIPTION					OTHER	
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
11/16/97 251		LA	CURR .00	.00	.00	.00	.00
4/08/98 058829			PREV .00	.00	.00	.00	.00
CLOSED 002	PREMISE -		RESV .00	.00	.00	.00	.00
7/20/99 242							
PREMISE	CLMT TRAVELING NORTH ON POYDRAS WITH GRE						
SUIT	EN LIGHT/POLICE OFFICER DIRECTED OV WHICH COLLIDED W/CLMT						.00
	VEHICLE DAMAGED						
11/16/97 251		LA	CURR .00	.00	.00	.00	.00
4/28/98 059486			PREV 10000.00	.00	1906.50	.00	.00
CLOSED 001			RESV .00	.00	.00	.00	.00
12/08/99 251							
LIABILITY	DETAILS OF HOW ACCIDENT OCCURRED ARE UNK						
SUIT	NOWN AT THIS TIME						
	DISLOCATED MIDDLE FINGER OF LEFT HAND/SWELLING/SAM DOCTOR						11,906.50
11/29/97 251		LA	CURR .00	.00	.00	.00	.00
2/05/98 056488			PREV 17500.00	.00	4389.63	.00	.00
CLOSED 001			RESV .00	.00	.00	.00	.00
4/11/00 251							
LIABILITY	SLIPPED AND FELL BACKWARDS ON WET FLOOR/						
SUIT	HIT HEAD						
	ALLEGES SHE HIT HER HEAD ON FLOOR & NECK WAS TIGHT & PAINFUL						
	/TRANSPORTED TO TULANE MEDICAL CENTER						21,889.63
12/07/97 251		LA	CURR .00	.00	.00	.00	.00
11/19/98 067640			PREV 13750.00	.00	6133.60	.00	.00
CLOSED 001			RESV .00	.00	.00	.00	.00
1/21/00 251							
LIABILITY	CLMT ALLEGES SHE SLIPPED AND FELL ON AN						
SUIT	OUTSIDE RAMP WHERE SOME ICE HAD BEEN DUMPED BY A TENT						
	LEFT KNEE INJURY						19,883.60
12/14/97 251		LA	CURR .00	.00	.00	.00	.00
12/16/97 054946			PREV .00	.00	15917.49	.00	.00
CLOSED 001			RESV .00	.00	.00	.00	.00
1/15/01 242							
LIABILITY	FELL OFF ESCALATOR						
SUIT	HEAD INJURY						15,917.49

INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT										AIG INSURANCE SERVICES, INC., RMS DIVISION		
CLIENT	ACCOUNT	STATE OF LOUISIANA	POLICY	003769873	GL	CONTRACT PERIOD	07/01/97 - 07/01/98	VALUATION	REPORT	PAGE		
1215073	3202008	STATE OF LOUISIANA	STATE OF LOUISIANA					DATE	DATE	20		
STATE OF LOUISIANA								12/31/01	01/11/02			
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE	TOTAL				
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		SUBRO	INCURRED				
STATUS	SYM ACCIDENT DESCRIPTION						OTHER					
CLOS DATE	H-OFF											
LOSS TYPE	INJURY DESCRIPTION											
12/22/97	251	LA	CURR	.00	62.00	62.00	.00	.00				
5/28/98	060663		PREV	.00	18922.76	18922.76	.00	.00				
OPEN	001		RESV	.00	7399.70	32399.70	.00	22.00-				
251												
LIABILITY	CLMT ALLEGING WHILE WORKING AT SUGAR							51,362.46				
SUIT	BOWL BASKETBALL GAME, SHE WAS STRUCK BY FREIGHT ELEVATOR											
	INJURY TO HEAD, LACERATIONS, DIZZINESS, RINGING											
	IN HER EARS											
1/01/98	251	LA	CURR	.00	.00	.00	.00	.00				
4/27/98	059485		PREV	.00	4329.15	60653.15	.00	.00				
CLOSED	001		RESV	.00	.00	.00	.00	46.00-				
10/04/00	251											
LIABILITY	SLIPPED AND FELL ON WATER ON FLOOR IN ME											
SUIT	N'S RESTROOM							60,607.15				
	TWISTED RIGHT ANKLE/SWELLING/SAW DOCTOR											
2/06/98	251	LA	CURR	.00	.00	.00	.00	.00				
2/20/98	057067		PREV	.00	52.87	52.87	.00	.00				
CLOSED	001		RESV	.00	.00	.00	.00	.00				
3/03/98	251											
PREMISE	PARKING ARM CAME DOWN ON REAR OF CLMT'S											
	VEHICLE							52.87				
	REAR-92' HONDA ACCORD											
3/08/98	251	LA	CURR	.00	.00	.00	.00	.00				
10/01/98	065881		PREV	.00	2775.50	2775.50	.00	.00				
CLOSED	001		RESV	.00	.00	.00	.00	.00				
3/01/00	251											
LIABILITY	UNKNOWN											
SUIT	SOFT TISSUE							2,775.50				
3/14/98	251	LA	CURR	.00	.00	.00	.00	.00				
4/17/98	059013		PREV	.00	4774.29	22274.29	.00	.00				
CLOSED	001		RESV	.00	.00	.00	.00	.00				
2/08/00	251											
LIABILITY	ALLEGES SHE WAS WALKING FROM THE PLAZA D											
SUIT	OWN TO N/E PARKING GARAGE WHEN SHE SLIPPED AND FELL											
	ALLEGES BROKEN RIGHT ARM AND BROKEN NOSE/BATON ROUGE GENERAL							22,274.29				
	HOSPITAL											

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AIG INSURANCE SERVICES, INC., RMIS DIVISION

INTELLIRISK REPORTING SYSTEM
RISK DETAIL REPORT

CLIENT	ACCOUNT	POLICY	GL	VALUATION	REPORT	PAGE
1215073	3202008	003769873	STATE OF LOUISIANA	DATE	DATE	21
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LOUISIANA		12/31/01	01/11/02	
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS
RPT. DATE	CASE NCCI OCCUPATION	LA	BI	PROPERTY	EXPENSE	TOTALS
STATUS	SYM ACCIDENT DESCRIPTION					
CLOS DATE	H-OFF INJURY DESCRIPTION					
LOSS TYPE						
4/03/98	251	LA	CURR	.00	.00	.00
4/17/98	059019		PREV	.00	.00	.00
CLOSED	001 PREMISE -		RESV	.00	.00	.00
4/28/98	251					
PREMISE	SEVERAL CARS WERE VANDALIZED BY YOUTHS I					
	N PARKING GARAGE					
	DAMAGED ALL 4 TIRES/EST \$487.03/1995 MITSUBISHI ECLIPSE					.00
4/03/98	251	LA	CURR	.00	.00	.00
4/17/98	059019		PREV	.00	.00	.00
CLOSED	002 PREMISE -		RESV	.00	.00	.00
4/28/98	251					
PREMISE	SEVERAL CARS WERE VANDALIZED BY YOUTHS I					
	N PARKING GARAGE					
	DAMAGED ALL 4 TIRES/EST \$68/1993 MERCURY VILLAGER VAN					.00
4/03/98	251	LA	CURR	.00	.00	.00
4/17/98	059019		PREV	.00	.00	.00
CLOSED	003 PREMISE -		RESV	.00	.00	.00
4/28/98	251					
PREMISE	SEVERAL CARS WERE VANDALIZED BY YOUTHS I					
	N PARKING GARAGE					
	DAMAGED WINDSHIELD AND INTERIOR DOOR HANDLE/TITANIUM VALVES/					
	EST \$539.53/1989 TOYOTA TERCEL					.00
4/03/98	251	LA	CURR	.00	.00	.00
4/17/98	059019		PREV	.00	.00	.00
CLOSED	004 PREMISE -		RESV	.00	.00	.00
4/28/98	251					
PREMISE	SEVERAL CARS WERE VANDALIZED BY YOUTHS I					
	N PARKING GARAGE					
	DAMAGED 3 TIRES/EST \$98.07/1993 PLYMOUTH COLT					.00
4/03/98	251	LA	CURR	.00	.00	.00
4/17/98	059019		PREV	.00	.00	.00
CLOSED	005 PREMISE -		RESV	.00	.00	.00
4/28/98	251					
PREMISE	SEVERAL CARS WERE VANDALIZED BY YOUTHS I					
	N PARKING GARAGE					
	DAMAGED 3 TIRES/EST \$138.43/1988 HONDA ACCORD LX					.00

INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMIS DIVISION			
CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE	
1215073	3202008	003769873	07/01/97 - 07/01/98	DATE 12/31/01	DATE 01/11/02	22	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LOUISIANA					
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		INCURRED
STATUS	SYM ACCIDENT DESCRIPTION						
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
4/03/98 251		LA	CURR	.00	.00	.00	.00
4/17/98 059019			PREV	.00	.00	.00	.00
CLOSED 006	PREMISE -		RESV	.00	.00	.00	.00
4/28/98 251							
PREMISE	SEVERAL CARS WERE VANDALIZED BY YOUTHS I						
	N PARKING GARAGE						
	1 DAMAGED TIRE/EST \$55.72/1995 CHEVROLET CAVALIER						.00
4/04/98 251		LA	CURR	.00	.00	.00	.00
5/12/98 059872			PREV	.00	.00	.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
1/25/99 251							
LIABILITY	ALLEGES INJURY/DETAILS UNKNOWN						
	ALLEGES INJURY PER ATTORNEY/DETAILS UNKNOWN						.00
4/04/98 251		LA	CURR	.00	.00	.00	.00
4/04/98 066241			PREV	.00	2253.20	57253.20	.00
CLOSED 001			RESV	.00	.00	.00	.00
3/07/00 242							
LIABILITY	CIMT TRIPPED OVER PIECE OF IRON THAT HEL						
	D TEMPORARY SEATING DOWN						
	FRACTURED LT HAND						57,253.20
6/07/98 251		LA	CURR	.00	.00	.00	.00
5/04/99 073412			PREV	.00	.00	246.57	.00
CLOSED 001			RESV	.00	.00	.00	.00
5/07/99 251							
LIABILITY	CHILD CUT FINGER WHILE TURNING ON WATER						
	FACET						
	MINOR CUT-LEFT INDEX FINGER						246.57
6/12/98 251		LA	CURR	.00	.00	.00	.00
8/21/98 064123			PREV	.00	.00	3500.00	.00
CLOSED 001			RESV	.00	.00	.00	.00
6/24/99 251							
LIABILITY	HAND GOT CAUGHT IN DOOR AT GATE A						
	CUT 3RD AND 4TH FINGERS OF RIGHT HAND						3,500.00

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RISK DETAIL REPORT							
CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE	
1215073	3202008	005883192	07/01/98 - 07/01/99	DATE	DATE	24	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LOUISIANA, LOUISIANA		12/31/01	01/11/02		
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	TOTALS	SALVAGE	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	ALLOCATED	SUBRO	INCURRED
STATUS	SYM	ACCIDENT DESCRIPTION			EXPENSE	OTHER	
CLOS DATE	H-OFF	INJURY DESCRIPTION					
LOSS TYPE							
7/04/98	251	LA	CURR	.00	.00	.00	.00
7/27/98	062921		PREV	.00	.00	.00	.00
CLOSED	001	PREMISE -	RESV	.00	.00	.00	.00
9/15/98	251	CLMTS VEHICLE STRUCK BY A PALLET WHEN					
PREMISE		INSURED EMPLOYEE'S EMPTIED TRASH					
		LEFTFRONT FENDER-96' FORD TAURUS					185.74
7/04/98	251	LA	CURR	.00	.00	.00	.00
7/27/98	062927		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
1/28/99	251	CLMT ALLEGES SHE SLIPPED & FELL ON					
LIABILITY		HANDICAPPED RAMP					
		LEFT KNEE					
7/04/98	251	LA	CURR	.00	.00	.00	.00
9/24/98	065653		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
7/20/99	251	CLMT ALLEGES SHE TRIPPED OVER METAL PLAT					
LIABILITY		E ON FLOOR & FELL					
		RIGHT KNEE & FOOT					
7/16/98	251	LA	CURR	.00	.00	.00	.00
7/27/98	062925		PREV	.00	.00	.00	.00
CLOSED	001	PREMISE -	RESV	.00	.00	.00	.00
1/27/99	251	CLMT ALLEGES CHAIR AT EVENT GOT BLACK					
PREMISE		STAINS ON HER DRESS					
		DRESS STAINS					.00
7/24/98	251	LA	CURR	.00	.00	.00	.00
8/06/98	063461		PREV	.00	.00	.00	.00
CLOSED	001	PREMISE -	RESV	.00	.00	.00	.00
10/06/98	251	EXITING THE GARAGE AND PARKING ARM					
PREMISE		CAME DOWN ON VEHICLE					
		MINOR DENTS AND SCRATCHES TO DRIVERS SIDE DOOR AND ROOF/					
		1997 HONDA ACURA					329.89

INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMIS DIVISION			
CLIENT	ACCOUNT	STATE	POLICY	CONTRACT PERIOD	VALUATION DATE	REPORT DATE	PAGE
1215073	3202008	STATE OF LOUISIANA	005883192 GL	07/01/98 - 07/01/99	12/31/01	01/11/02	25
STATE OF LOUISIANA	STATE OF LOUISIANA	LOUISIANA	STATE OF LOUISIANA, LOUISIANA				
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL PROPERTY	ALLOCATED EXPENSE	TOTALS	TOTAL INCURRED
RPT. DATE	CASE NCCI OCCUPATION		BI				
STATUS	SYM ACCIDENT DESCRIPTION						
CLOS DATE	H-OFF INJURY DESCRIPTION						
LOSS TYPE							
8/05/98	251	LA	CURR	.00	.00	.00	.00
8/21/98	064120		PREV	.00	.00	.00	.00
CLOSED	001 PREMISE -		RESV	.00	.00	.00	.00
9/16/98	251						
PREMISE	PARKING ARM HIT ANTENNA ON VEHICLE						
	DAMAGED ANTENNA/EST \$129.59/						129.59
	1992 ACURA WAGON						
8/24/98	251	LA	CURR	.00	.00	.00	.00
9/03/98	064595		PREV	.00	.00	.00	.00
CLOSED	001 PREMISE -		RESV	.00	.00	.00	.00
9/21/98	251						
PREMISE	PARKING ARM MALFUNCTIONED AND HIT						
	CLMT VEHICLE						
	DAMAGED ROOF PANEL/EST \$395.96/						441.96
	1994 ISUZU TROOPER						
9/04/98	251	LA	CURR	.00	.00	.00	.00
11/04/98	067077		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
6/24/99	251						
LIABILITY	CLMT ALLEGES HE SLIPPED & FELL						
	FINGER, LUNG PUNCTURED						6,695.50
9/19/98	251	LA	CURR	.00	.00	.00	.00
9/30/98	065548		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
8/02/99	251						
LIABILITY	CLMT ALLEGES SHE & DAUGHTER WERE STRUCK						.00
	WITH BILLY CLUB BY SECURITY GUARD						
	BRUISED						
9/19/98	251	LA	CURR	.00	.00	.00	.00
9/30/98	065548		PREV	.00	.00	.00	.00
CLOSED	002		RESV	.00	.00	.00	.00
8/02/99	251						
LIABILITY	CLMT ALLEGES SHE & DAUGHTER WERE STRUCK						.00
	WITH BILLY CLUB BY SECURITY GUARD						
	SHOULDER BRUISED						

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CLIENT	ACCOUNT	STATE OF LOUISIANA	POLICY	CONTRACT PERIOD	VALUATION DATE	REPORT DATE			
1215073	3202008	STATE OF LOUISIANA	005883192 GL	07/01/98 - 07/01/99	12/31/01	01/11/02		26	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LOUISIANA, LOUISIANA							
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE	TOTAL	
RT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		SUBRO	INCURRED	
STATUS	SYM ACCIDENT DESCRIPTION						OTHER		
CLOS DATE	H-OFF								
LOSS TYPE	INJURY DESCRIPTION								
9/26/98	251	LA	CURR	.00	605.50	605.50		.00	
10/25/99	078208		PREV	.00	17237.05	17237.05		.00	
001			RESV	35000.00	8940.32	43940.32		.00	
LIABILITY	242								
	CLMT SLIPPED AND FELL DUE TO LIQUID ON T								
	HE FLOOR								
	UNKNOWN BODY GENERAL								61,782.87
9/30/98	251	LA	CURR	.00	.00	.00		.00	
3/26/99	072425		PREV	.00	4648.38	4648.38		.00	
001			RESV	.00	.00	.00		.00	
2/24/00	251								
LIABILITY	CLMT ALLEGES HE STEPPED INTO AN OPEN DRA								
	IN IN KITCHEN								
	NECK/BACK								4,648.38
10/03/98	251	LA	CURR	.00	.00	.00		.00	
3/04/99	071730		PREV	135.95	.00	135.95		.00	
001			RESV	.00	.00	.00		.00	
3/22/99	251								
LIABILITY	CLMT STUCK FINGER IN SOAP DISPENSER & CU								
	T IT								
	CUT FINER								135.95
10/11/98	251	LA	CURR	.00	50.50	50.50		.00	
10/05/99	077669		PREV	85438.93	27811.37	113250.30		.00	
001			RESV	.00	.00	.00		.00	
4/19/01	242								
LIABILITY	CLMT ALLEGES SHE FELL IN WALKWAY DUE TO								
	WATER								
	BROKEN ANKLE, SPRAIN LEFT WRIST, HEART ATTACK ON 2-28-99								113,300.80
11/15/98	251	LA	CURR	.00	.00	.00		.00	
2/11/99	071052		PREV	.00	.00	.00		.00	
001			RESV	.00	.00	.00		.00	
2/23/99	251								
LIABILITY	CLMT FELL ON ESCALATOR								
	LACERATION SHIN, KNEECAP								.00

INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMS DIVISION			
CLIENT	ACCOUNT	STATE OF LOUISIANA	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE
1215073	3202008	STATE OF LOUISIANA	005883192 GL	07/01/98 - 07/01/99	DATE	DATE	27
STATE OF LOUISIANA			STATE OF LOUISIANA, LOUISIANA		12/31/01	01/11/02	
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		SUBRO
STATUS	SYM ACCIDENT DESCRIPTION						OTHER
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
11/15/98	251	LA	CURR	.00	.00	.00	.00
6/16/99	075394		PREV	.00	.00	24500.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
11/15/99	251						
LIABILITY	RAINING/CLMT SLIPPED ON WATER INSIDE ENT						
	RANCE						
	UNKNOWN					24,500.00	
12/13/98	251	LA	CURR	.00	.00	.00	.00
1/19/99	070049		PREV	.00	.00	4250.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
6/18/99	251						
LIABILITY	CLMT ALLEGES HE SLIPPED & FELL ON WET FL						
	OOB ATSAINTS/FALCON FOOTBALL GAME						
	ARM, HEAD						
12/27/98	251	LA	CURR	.00	.00	.00	4,250.00
3/04/99	071728		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	4722.40	.00
10/25/99	251					.00	.00
LIABILITY	CLMT ALLEGES HE TRIPPED ON UNEVEN GROUND						
	& FELL						
	RIGHT KNEE ABRASHION						
12/30/98	251	LA	CURR	.00	.00	.00	4,722.40
2/18/00	082023		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	3861.75	.00
7/18/00	251					.00	.00
LIABILITY	CLMT ALLEGES THAT GATE ON FREIGHT ELEVAT						
SUIT	OR AT SUPERDOME MALFUNCTIONED & FELL & STRUCK HER						
	HEAD INJURY--NO SPECIFICS						
1/30/99	251	LA	CURR	.00	.00	.00	3,861.75
3/01/99	071727		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	1463.00	.00
3/22/99	251					.00	.00
LIABILITY	CHILD HIT IN HEAD BY THROWN FULL BEER						
	CAN						
	HEAD-CONCUSSION						
							1,463.00

INTELLIRISK REPORTING SYSTEM RISK DETAIL REPORT				AIG INSURANCE SERVICES, INC., RMS DIVISION			
CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE	
1215073	3202008	005883192	07/01/98 - 07/01/99	DATE	DATE	29	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LOUISIANA, LOUISIANA		12/31/01	01/11/02		
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	TOTAL
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		INCURRED
STATUS	SYM ACCIDENT DESCRIPTION						
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
3/27/99	251	LA	CURR	.00	.00	.00	.00
7/16/99	075419		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
5/01/00	251						
LIABILITY	CLMT STATES SHE FELL WHEN SHE TRIPPED OV						
	ER PARKING BLOCK						.00
	KNEES / HANDS AND NECK PAIN						
4/10/99	251	LA	CURR	.00	.00	.00	.00
5/04/99	073586		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
11/03/99	251						
LIABILITY	CLMT ALLEGES A FALL ON A SLIPPERY						
	ESCALATOR						
	ANKLE FRACTURE-SURGERY						.00
4/10/99	251	LA	CURR	.00	.00	.00	.00
5/04/99	073598		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
6/23/99	251						
LIABILITY	CLMT ALLEGES SHE SLIPPED IN WATER & FELL						
	LEFT SHOULDER						1,300.00
4/10/99	251	LA	CURR	.00	.00	.00	.00
5/04/99	083181		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
6/28/00	251						
LIABILITY	CLMT WALKING DOWN STOPPED ESCALATOR SLIP						
	PED ON LANDIND/ALLEGES WATER ON GROUND						
	BACK OF HEAD/BACK & NECK						4,023.80
4/10/99	251	LA	CURR	.00	.00	.00	.00
11/03/99	081292		PREV	.00	.00	.00	.00
CLOSED	001		RESV	.00	.00	.00	.00
6/28/00	251						
LIABILITY	CLMT STATES SHE LEFT VEH PARKED AT THE S						
	UPERDONE AND HAD PERMISSION/ INSD MOVED IT WITH A FORK LIFT						
	1995 NISSAN KING CAB / HOLE IN TAILGATE BROKE TAILLIGHTS AND						
	DMG BUMPER						1,289.15

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CLIENT	ACCOUNT	STATE OF LOUISIANA	STATE OF LOUISIANA	POLICY	GL	STATE OF LOUISIANA, LOUISIANA	CONTRACT PERIOD	VALUATION	REPORT	DATE	DATE	DATE	DATE	DATE	PAGE
1215073	3202008	STATE OF LOUISIANA	STATE OF LOUISIANA	005883192	GL	STATE OF LOUISIANA, LOUISIANA	07/01/98 - 07/01/99	12/31/01	01/11/02	01/11/02	01/11/02	01/11/02	01/11/02	01/11/02	30
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE	TOTALS	SUBRO	OTHER	TOTAL				
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE						INCURRED				
STATUS	SYM ACCIDENT DESCRIPTION														
CLOS DATE	H-OFF	INJURY DESCRIPTION													
LOSS TYPE															
4/21/99	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00				
4/29/99	073402		PREV	.00	.00	.00	.00	.00	.00	.00	.00				
CLOSED	001	PREMISE -	RESV	.00	.00	.00	.00	.00	.00	.00	.00				
6/04/99	251	CLMT ALLEGES PROPERTY MISSING FROM CONFE													
PREMISE		RENCE ROOM WHERE IT HAD BEEN LEFT UNATTENDED OVERNIGHT													
		MICROPHONES/POWER SUPPLY/MICROPHONE													
4/21/99	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00				
4/29/99	073402		PREV	.00	.00	.00	.00	.00	.00	.00	.00				
NOTICE	002	PREMISE -	RESV	.00	.00	.00	.00	.00	.00	.00	.00				
PREMISE	251	CLMT ALLEGES PROPERTY MISSING FROM CONFE													
		RENCE ROOM WHERE IT HAD BEEN LEFT UNATTENDED OVERNIGHT													
		PHOTO EQUIPMENT/CAMERA													
5/10/99	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00				
5/13/99	073894		PREV	.00	.00	.00	.00	.00	.00	.00	.00				
CLOSED	001	PREMISE - unknown	RESV	.00	.00	.00	.00	.00	.00	.00	.00				
9/21/99	251	CLAIMANT EXITING GARAGE STRUCK TIRE AGAIN													
PREMISE		NST CONCRETE STICKING OUT IN GARAGE													
		RIGHT FRONT TIRE PUNCTURED AND RIM OF WHEEL BENT													
6/02/99	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00				
7/15/99	075392		PREV	.00	.00	.00	.00	.00	.00	.00	.00				
CLOSED	001		RESV	.00	.00	.00	.00	.00	.00	.00	.00				
7/27/01	251	ATTY ALLEGES CLMT SUSTAINED INJURIES WHE													
LIABILITY		N SAFETY BAR ON AMUSEMENT RIDES MALFUNCTIONED													
SUIT		INJURIES UNKNOWN													
6/06/99	251	LA	CURR	.00	.00	.00	.00	.00	.00	.00	.00				
6/14/99	074524		PREV	.00	.00	.00	.00	.00	.00	.00	.00				
CLOSED	001		RESV	.00	.00	.00	.00	.00	.00	.00	.00				
8/03/99	251	CLMT EXITING RIDE BRUSHED LEG AGAINST AN													
LIABILITY		OBJECT THAT INJURED SAME													
		4" LONG SCRATCH TO LEG													

INTELLIRISK REPORTING SYSTEM				AIG INSURANCE SERVICES, INC., RMIS DIVISION			
RISK DETAIL REPORT							
CLIENT	ACCOUNT	POLICY	CONTRACT PERIOD	VALUATION	REPORT	PAGE	
1215073	3202008	005883192	07/01/98 - 07/01/99	DATE	DATE	31	
STATE OF LOUISIANA	STATE OF LOUISIANA	STATE OF LOUISIANA, LOUISIANA		12/31/01	01/11/02		
LOSS DATE	OFF CLAIMANT NAME	STATE	COMP	MEDICAL	ALLOCATED	TOTALS	SALVAGE
RPT. DATE	CASE NCCI OCCUPATION		BI	PROPERTY	EXPENSE		SUBRO
STATUS	SYM ACCIDENT DESCRIPTION						OTHER
CLOS DATE	H-OFF						
LOSS TYPE	INJURY DESCRIPTION						
6/14/99	251	LA	.00	.00	.00	.00	.00
6/16/99	074559		.00	176.58	.00	176.58	.00
CLOSED	001		.00	.00	.00	.00	.00
7/02/99	251						
PREMISE	CLMT VEHICLE RECEIVED DAMAGE FROM SOMETHING DROPPING FROM OVERHEAD ONTO CAR HOOD DAMAGE TO PAINT ON HOOD OF '99 HONDA ACCORD.					176.58	
6/17/99	251	LA	.00	.00	.00	.00	.00
7/15/99	075372		.00	54.95	.00	54.95	.00
CLOSED	001		.00	.00	.00	.00	.00
9/30/99	251						
PREMISE	CLMT ALLEGES WHITE SUBSTANCE DRIPPED FROM PARKING LOT ONTO HER VEHICLE WHITE SUBSTANCE TO ROOF/HOOD WINDOWS & DOORS					54.95	
6/20/99	251	LA	.00	.00	.00	.00	.00
10/08/99	077780		5000.00	.00	2852.00	7852.00	.00
CLOSED	001		.00	.00	.00	.00	.00
2/21/01	251						
LIABILITY	CLMT ALLEGES SHE STEPPED INTO A HOLE THAT WAS BETWEEN THE CURB & BRICK CAUSING HER TO FALL						
SUIT	FRACATURE RIGHT FOOT						
6/22/99	251	LA	.00	.00	.00	.00	.00
7/27/00	086505		.00	.00	4642.55	4642.55	.00
OPEN	001		20000.00	.00	5357.45	25357.45	.00
251							
LIABILITY	CLMT PULLING UP FLAPS ON DECK OF RETRACTABLE SEATING/FOOT SLIPPED CAUSING CLMT TO FALL INJURIES ARE NOT SPECIFIC IN SUIT PAPERS						
SUIT							
							30,000.00